

Table 15
North Carolina Medicaid
State Fiscal Year 2003
Medicaid Copayment Amounts

<u>Service</u>	<u>Copayment Amount</u>
Chiropractor visit	\$1.00
Dental visit	\$3.00
Optical service	\$2.00
Optometrist visit	\$2.00
Outpatient visit	\$3.00
Physician visit	\$3.00
Podiatrist visit	\$1.00
Prescription drugs (including refills):	
Generic & Insulin	\$1.00
Brand Name	\$3.00